

OFFICE OF SECRETARY OF STATE CORPORATIONS DIVISION

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Atlanta, Georgia 30334-1530
(404) 656-2817
Registered agent, officer, entity status information via the Internet
http://www.georgiacorporations.org

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED PARTNERSHIP

IMPORTANT

Remember to include your e-mail address when completing this transmittal form.

Providing your e-mail address allows us to notify you via e-mail when we receive your filing and when we take action on your filing. Please enter your e-mail address on the line below. Thank you.

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E-Mail:		

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

Limited Partnership Name		Name Reservation Number (Optional)		
Date business commenced (or proposed) in Georgia received by the Secretary of State, a \$500 penalty mus	(NOTE: If date provided here is mo t be paid; penalty is statutory and can	ore than 30 days prior to the date the not be waived by Secretary of State	ne application is te.)	
Name of filing person (certificate will be mailed to this p	erson, at address below)	Telephone Numbe	er	
Address	City	State	Zip Code	
State of Formation (Home state or country) Date of Formation in home state				
	011	21.1	7: 0 1	
Principal Office Mailing Address	City	State	Zip Code	
Name of Registered Agent in Georgia				
Registered Office Street Address in Georgia (Post office	e box or mail drop not acceptable for i	registered office address)		
		GA		
	,	State	Zip Code	
Attach list providing name and business address of each	ch general partner.			
Address where partnership records are maintained	City	State	Zip Code	
NOTICE: Mail or deliver an original and one copy of address. Filing fes are NON-refundable.	f this form and the filing fee of \$225	5.00 payable to "Secretary of Sta	te" at the above	
address shown in #7 above until its registration in Ge of the Official Code of Georgia Annotated, appoints the	eorgia is canceled or withdrawn. The Secretary of State as agent for s	he limited partnership, in accord ervice of process if no agent has	lance with Title 14 s been appointed	
eneral Partner	Date			
	Date business commenced (or proposed) in Georgia received by the Secretary of State, a \$500 penalty mus. Name of filing person (certificate will be mailed to this particle. Address State of Formation (Home state or country) Principal Office Mailing Address Name of Registered Agent in Georgia Registered Office Street Address in Georgia (Post office) City Attach list providing name and business address of each address where partnership records are maintained NOTICE: Mail or deliver an original and one copy or address. Filing fes are NON-refundable. This application is executed by a general partner of the address shown in #7 above until its registration in Georgia or, if appointed, the agent's authority has in Georgia or, if appointed, the agent's authority has in the state of the official Code of Georgia Annotated, appoints the state of the official Code of Georgia Annotated, appoints the official code of Georgia Annotated and official code of Geo	Date business commenced (or proposed) in Georgia (NOTE: If date provided here is moreceived by the Secretary of State, a \$500 penalty must be paid; penalty is statutory and can Name of filing person (certificate will be mailed to this person, at address below) Address City State of Formation (Home state or country) Date of Formation i Principal Office Mailing Address City Name of Registered Agent in Georgia Registered Office Street Address in Georgia (Post office box or mail drop not acceptable for City County Attach list providing name and business address of each general partner. Address where partnership records are maintained City NOTICE: Mail or deliver an original and one copy of this form and the filling fee of \$225 address. Filling fes are NON-refundable. This application is executed by a general partner of the limited partnership. The limited address shown in #7 above until its registration in Georgia is canceled or withdrawn. To the Official Code of Georgia Annotated, appoints the Secretary of State as agent for s in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be secretary of the agent cannot be secretary o	Date business commenced (or proposed) in Georgia (NOTE: If date provided here is more than 30 days prior to the date it received by the Secretary of State, a \$500 penalty must be paid; penalty is statutory and cannot be waived by Secretary of State Name of filing person (certificate will be mailed to this person, at address below) Telephone Number Address City State State of Formation (Home state or country) Date of Formation in home state Principal Office Mailing Address City State Name of Registered Agent in Georgia Registered Office Street Address in Georgia (Post office box or mail drop not acceptable for registered office address) GA City State Attach list providing name and business address of each general partner. Address where partnership records are maintained City State NOTICE: Mail or deliver an original and one copy of this form and the filling fee of \$225.00 payable to "Secretary of State address. Filling fes are NON-refundable. This application is executed by a general partner of the limited partnership. The limited partnership undertakes to keep address shown in #7 above until its registration in Georgia is canceled or withdrawn. The limited partnership, in accord of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent ha in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be served or found by the exerci-	

FORM 251

Request certificates and obtain entity information via the Internet: http://www.georgiacorporations.org